STATE OF NEW HAMPSHIRE

2018 Statement of Income and Expenses for LOBBYISTS

(RSA Chapter 15) PLEASE PRINT I. Name of Lobbyist(s) II. Name of lobbyist's partnership, firm or corporation, if any: e-mail III. This statement covers: (Choose one - file separate reports for each client, OR you may file a separate report for reportable expense transactions which are not attributable to any one client). All reportable transactions occurring in the months prior to the reporting date relative to the following client: OR All reportable transactions by the lobbyist (including the lnbbyist's family), or the lobbying firm listed below which are unrelated to any particular client. April 25, 2018 IV. Date of Report July 25, 2018 🗍 -Reports cover: activity from date of registration to 3/31/18 activity from 4/1/18 to 6/30/18 October 31, 2018 activity from 7/1/18 to 9/30/18 January 30, 2019 🔲 activity from 10/1/18 to 12/31/18 V. There have been no fees received and no reportable transactions made since the last report. If this box is checked, complete just this form and submit it to the Secretory of State's Office, State House, Room 204, Concord, NH 03301. VI. Check if additional reports are attached: If you have received fees or made expenditures, you must file Addendum A- Fees and Expenses [1] If you have paid an honorarium or reimbursed expenses, you must file Addendum B- Report of Honorariums or Expense Reimbursement

Sworn Statement/Affirmation by Lobbyist

I have read RSA No, RSA 15-B, RSA 14-C and RSA 664 and hereby swear or affirm that the foregoing information is true and complete to the best of my knowledge and belief.

☐ If you, your firm, or your family has made political contributions, you must file Addendum C- Political Contributions

(Signature of lobbyist)

State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Sworn Statement/Affirmation by Lobbyist Statement of Income and Expenses for:

Name of Lobbying partnership, firm, or corporation: Dennehy & Bouley LLC		
Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to any		
particular client): Special Olympics - NH		
Date of Report (check one):		
April 25, 2018		
I have read RSA 15, RSA 15-B, RSA 664, the Statement of Income and Expenses described above, and the following Addendums submitted with that Statement (insert the number of Addendum forms being submitted):		
Addendum A(s).		
Addendum B(s).		
Addendum C(s).		
I hereby swear or affirm that the foregoing information on the Statement and each Addendum is true and complete to the best of my knowledge and belief. (Signature of lobbyist) (Date)		
Alex Koutroubas (Print Name of lobbyist)		

State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Sworn Statement/Affirmation by Lobbyist Statement of Income and Expenses for:

Name of Lobbying partnership, firm, or corporation: Dennehy & Bouley LLC
Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to any
particular client): Special Olympics - NH
Date of Report (check one):
April 25, 2018
I have read RSA 15, RSA 15-B, RSA 664, the Statement of Income and Expenses described above, and the following Addendums submitted with that Statement (insert the number of Addendum forms being submitted):
Addendum A(s).
Addendum B(s).
Addendum C(s).
I hereby swear or affirm that the foregoing information on the Statement and each Addendum is true and complete to the best of my knowledge and belief.
(Signature of lobbyist) /0/29/8 (Date)
Tyler Clark (Print Name of lobbyist)

P L E A S E P R I N

STATE OF NEW HAMPSHIRE

Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

	/
I. Name of Lobbyist(s) Mile Dennehy Alex Kowin	subas/Tyler Clar
II. Name of lobbyist's partnership, firm or corporation, if any:	·
Dennehy & Bouley LLC (Name of partnership, firm or corporation)	
(Name of partnership, firm or corporation)	1- introlog
III. Name of Client Special Olympics -Nt	TDate 10/04/18
IV. Fees Received Indicate the gross amount of all fees received from the client identified above the to lobbying, including fees for services such as public advocacy, government reincluding research, monitoring legislation, and related legal work. The gross reduced by any expenses:	elations, or public relations services
a) Total of all fees received in this reporting period	a) \$
b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar year	b) s <u>2,500.00</u>
c) Total of all fees received to date (Add lines a and b)	c)\$_2 <u>500.00</u>
 d) Indicate the amount of any such fees that are due, but have not yet been paid 	d) s 2,500.00
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to reported. Separate reports are to be filed for expenditures made relative to each of the lobbyist(s)/firm that are unrelated to any one client a separate report mexpenses are to be reported in one of three categories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office expindividual expenses where the expenditure was of \$25.00 or less (for example lunch where the cost was \$25.00 or less, purchase of a pen with a value of less being lobbied, purchase of a ceremonial object given to a person being lobbied (c) an itemized statement of each individual expenditure made during this report any purpose not covered by (a) (for example: purchase of a meal with value ceremonial object to be given to the subject of lobbying with a value greater restaurant expenses for a legislative reception). Expenses for honorariums, contributions will be reported on separate addendums and should not be reported.	aggregate total of all expenses paid penses; (b) the aggregate total of all expenses paid penses; (b) the aggregate total of all expenses parchased during a business than \$10 that is given to the person d with a value of \$25.00 or less); and thing period of greater than \$25.00 for e of greater than \$25, purchase of a r than \$25, but not greater than \$50, expense reimbursement, or political
 a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying. 	a) \$
b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.	b) \$
C) Total of all itemized expenditures reported in detail in section VI.	c) \$

d) Total expenses for this reporting period (Add lines a, b and c)	d) \$
c) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	c) \$
f) Total of all expenses year to date	f) \$
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from leperiod, including by whom paid or to whom charged.	obbying fees during this reporting
Paid to:	Amount:
	\$
	\$
	\$
	\$
	\$
	\$
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm	m that the foregoing information
is true and complete to the best of my knowledge and belief.	
	10/29/18
(Signature of lobbyist)	(Daic)
(Print Name of lobbyist)	